PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

ATK 1300/

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN		
	OTAL CLAIM		(Column 1)		(Column 2)]	TYPE [OR	SMALL	ENTITY	
TOTAL CLAIMS			15					RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	385.00	OR	BASIC FEE	770.00	
T	OTAL CHARGE	ABLE CLAIMS	15 minus 20=		*			X\$ 9=		OR	XS18≃		
INDEPENDENT CLAIMS			/ m	inus 3 =				X43=		OR	X86=		
М	ULTIPLE DEPE	NDENT CLAIM P	RESENT						 	7			
* If the difference in column 1 is less than zero, enter "0" in column						rolumn 2	l	+145=		OR	+290=		
CLAIMS AS AMENDED - PART II						COIGHIII E		TOTAL	385	OR			
	(Column 1)	AMENDEL	MENDED - PART II (Column 2) (Column				SMALL	ENTITY	OR	OTHER SMALL		
_	1	CLAIMS	1	HIGHE		1	r		,	¬			
AMENDMENT A		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***		=		X43=		OR	X86=		
_	FIRST PRESE	ENTATION OF M	JLTIPLE DEF	PENDENT	CLAIM			+145=		1	+290=		
							L	+145=		OR	TOTAL		
					•		Α	DDIT. FEE		OR ,	ADDIT. FEE		
		(Column 1)		(Colum		(Column 3)			-				
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOI PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
M Q N	Total	*	Minus	źź		=		X\$ 9=		OR	X\$18=		
WE	Independent	*	Minus	***		=		X43=		OR	X86=		
	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT (CLAIM		H			 			
								+145=		OR	+290=	•	
							ΑE	TOTAL DIT. FEE		OR ,	TOTAL DDIT. FEE	•	
		(Column 1)		(Columi	n 2)	(Column 3)							
		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHES NUMBE PREVIOU PAID FO	R ISLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMEN	Total	*	Minus	**		= .	Г	X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=	十	X43=			X86=		
\perp	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT C	LAIM		-			OR			
								145=		OR	+290=	_ '	
** If	If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."								·	OR A	TOTAL		
*)f Ti	the "Highest Nun he "Highest Numl	nber Previously Paid ber Previously Paid	d For" IN THIS For" (Total or I	SPACE is li independent	ess than) is the l	3, enter "3." nighest number f		DIT. FEE L	opriate box				